



HAWAII STATE ETHICS COMMISSION
1001 BISHOP STREET, ASB TOWER 970
P.O. BOX 616, HONOLULU, HAWAII 96809
TEL: 587-0460 FAX: 587-0470
email: ethics@hawaiiethics.org

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STATE OF HAWAII
STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST			
NAME(Last)	(First)	(Middle)	TELEPHONE
KAKU	BEVERLY	J.	(808) 548-2945
MAILING ADDRESS (Street)			FAX
P. O. Box 898900, Mililani, HI 96789-8900			(808) 548-2975
(City)	(State)	(Zip Code)	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
MAILING ADDRESS (Street)			FAX
(City)	(State)	(Zip Code)	

PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Castle & Cooke, Inc.		(808) 548-4811
MAILING ADDRESS (Street)		FAX
P. O. Box 898900 100 Kahelu Avenue, 2nd Floor		(808) 548-2975
(City)	(State)	(Zip Code)
Mililani	HI	96789
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Harry A. Saunders		(808) 548-4811
MAILING ADDRESS (Street)		FAX
P. O. Box 898900 100 Kahelu Ave., 2nd Floor		
(City)	(State)	(Zip Code)
Mililani	HI	96789

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

Agriculture

Education

Human Services

Science, Technology &
Economic DevelopmentCommunications &
Public UtilitiesGovernment Operations &
FinanceIntergovernmental Relations,
International Affairs

Tourism & Recreation

Consumer Protection &
Commerce

Hawaiian Affairs

Labor & Employment

Transportation

Culture, Arts, Historic
Preservation

Health

Planning, Land & Water
Use ManagementOther: (indicate below)

_____Ecology, Energy
Environmental Protection

Housing

Public Safety & Corrections

PART IV CERTIFICATION OF LOBBYIST*I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.*

(Signature of Lobbyist)

December 29, 2004

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Harry A. Saunders

Sr. Vice President

NAME OF ORGANIZATION (if applicable)

TELEPHONE

Castle & Cooke, Inc.

(808) 548-4811

MAILING ADDRESS (Street)

FAX

P. O. Box 898900

100 Kahelu Avenue, 2nd Floor

(808) 548-2975

(City)

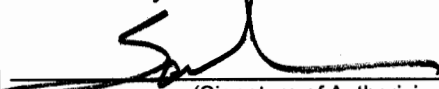
(State)

(Zip Code)

Mililani

HI

96789

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.

(Signature of Authorizing Officer or Person Represented)

12/30/04

(Date)